

County: Marinette
WHISPERING OAKS CARE CENTER
620 HARPER AVENUE

Facility ID: 1400

Page 1

PESHTIGO 54157 Phone: (715) 582-4148

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 50

Total Licensed Bed Capacity (12/31/00): 60

Number of Residents on 12/31/00: 42

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Average Daily Census:

Corporation

Skilled

No

Yes

45

| Services Provided to Non-Residents | | | Age, Sex, and Primary Diagnosis of Residents (12/31/00) | | | | Length of Stay (12/31/00) | | % |
|--|-----|----------------------------|---|------------|-------|--------------------|---------------------------|--|-------|
| Home Health Care | No | Primary Diagnosis | % | Age Groups | % | Less Than 1 Year | 38.1 | | |
| Supp. Home Care-Personal Care | No | | | | | 1 - 4 Years | 35.7 | | |
| Supp. Home Care-Household Services | No | Developmental Disabilities | 2.4 | Under 65 | 19.0 | More Than 4 Years | 26.2 | | |
| Day Services | Yes | Mental Illness (Org./Psy) | 28.6 | 65 - 74 | 4.8 | | | | |
| Respite Care | Yes | Mental Illness (Other) | 16.7 | 75 - 84 | 52.4 | | | | 100.0 |
| Adult Day Care | Yes | Alcohol & Other Drug Abuse | 0.0 | 85 - 94 | 16.7 | | | | |
| Adult Day Health Care | Yes | Para-, Quadra-, Hemiplegic | 0.0 | 95 & Over | 7.1 | | | | |
| Congregate Meals | No | Cancer | 2.4 | | | | | | |
| Home Delivered Meals | No | Fractures | 0.0 | | 100.0 | | | | |
| Other Meals | No | Cardiovascular | 21.4 | 65 & Over | 81.0 | | | | |
| Transportation | No | Cerebrovascular | 2.4 | | | RNs | 10.8 | | |
| Referral Service | Yes | Diabetes | 7.1 | Sex | % | LPNs | 14.4 | | |
| Other Services | No | Respiratory | 7.1 | | | Nursing Assistants | | | |
| Provide Day Programming for Mentally Ill | No | Other Medical Conditions | 11.9 | Male | 42.9 | Aides & Orderlies | 40.6 | | |
| Provide Day Programming for Developmentally Disabled | No | | 100.0 | Female | 57.1 | | | | |
| | | | | | | | | | |

Method of Reimbursement

| Level of Care | Medicare (Title 18) | | | Medicaid (Title 19) | | | Other | | | Private Pay | | | Managed Care | | | Percent Of All Residents | |
|----------------------|------------------------|-------|----------|------------------------|-------|----------|-------|-------|----------|-------------|-------|----------|--------------|-----|----------|--------------------------------|--------|
| | No. | % | Per Diem | No. | % | Per Diem | No. | % | Per Diem | No. | % | Per Diem | No. | % | Per Diem | | Total |
| | | | Rate | | | Rate | | | Rate | | | Rate | | | Rate | | |
| Int. Skilled Care | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Skilled Care | 1 | 100.0 | \$126.57 | 30 | 85.7 | \$86.39 | 1 | 100.0 | \$105.06 | 5 | 100.0 | \$118.00 | 0 | 0.0 | \$0.00 | 37 | 88.1% |
| Intermediate | --- | --- | --- | 5 | 14.3 | \$73.04 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 5 | 11.9% |
| Limited Care | --- | --- | --- | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Personal Care | --- | --- | --- | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Residential Care | --- | --- | --- | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Dev. Disabled | --- | --- | --- | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Traumatic Brain Inj. | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Ventilator-Dependent | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Total | 1 | 100.0 | | 35 | 100.0 | | 1 | 100.0 | | 5 | 100.0 | | 0 | 0.0 | | 42 | 100.0% |

| Admissions, Discharges, and Deaths During Reporting Period | | Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 | | | | |
|--|------|--|---------------|-------------------------|--------------------------------------|---------------------------|
| | | | | % Needing Assistance of | % Totally Dependent | Total Number of Residents |
| Percent Admissions from | | Activities of | % Independent | One Or Two Staff | | |
| Private Home/No Home Health | 9.9 | Daily Living (ADL) | | | | |
| Private Home/With Home Health | 5.6 | Bathing | 11.9 | 83.3 | 4.8 | 42 |
| Other Nursing Homes | 4.2 | Dressing | 11.9 | 83.3 | 4.8 | 42 |
| Acute Care Hospitals | 73.2 | Transferring | 42.9 | 50.0 | 7.1 | 42 |
| Psych. Hosp. -MR/DD Facilities | 7.0 | Toilet Use | 26.2 | 66.7 | 7.1 | 42 |
| Rehabilitation Hospitals | 0.0 | Eating | 76.2 | 19.0 | 4.8 | 42 |
| Other Locations | 0.0 | ***** | | | | |
| Total Number of Admissions | 71 | Continence | | % | Special Treatments | % |
| Percent Discharges To: | | Indwelling Or External Catheter | | 7.1 | Receiving Respiratory Care | 16.7 |
| Private Home/No Home Health | 18.2 | Occ/Freq. Incontinent of Bladder | 42.9 | | Receiving Tracheostomy Care | 0.0 |
| Private Home/With Home Health | 6.1 | Occ/Freq. Incontinent of Bowel | 28.6 | | Receiving Suctioning | 0.0 |
| Other Nursing Homes | 4.5 | | | | Receiving Ostomy Care | 4.8 |
| Acute Care Hospitals | 43.9 | Mobility | | | Receiving Tube Feeding | 2.4 |
| Psych. Hosp. -MR/DD Facilities | 4.5 | Physically Restrained | | 2.4 | Receiving Mechanically Altered Diets | 11.9 |
| Rehabilitation Hospitals | 0.0 | | | | | |
| Other Locations | 1.5 | Skin Care | | | Other Resident Characteristics | |
| Deaths | 21.2 | With Pressure Sores | | 2.4 | Have Advance Directives | 40.5 |
| Total Number of Discharges | | With Rashes | | 14.3 | Medications | |
| (Including Deaths) | 66 | | | | Receiving Psychoactive Drugs | 57.1 |

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

| | Ownership: | | | Bed Size: | | Licensure: | | All | |
|--|---------------|------------|-------|------------|-------|------------|-------|------------|-------|
| | Proprietary | | | 50-99 | | Skilled | | Facilities | |
| | This Facility | Peer Group | Ratio | Peer Group | Ratio | Peer Group | Ratio | % | Ratio |
| Occupancy Rate: Average Daily Census/Licensed Beds | 75.0 | 83.7 | 0.90 | 86.6 | 0.87 | 87.0 | 0.86 | 84.5 | 0.89 |
| Current Residents from In-County | 69.0 | 75.1 | 0.92 | 69.4 | 0.99 | 69.3 | 1.00 | 77.5 | 0.89 |
| Admissions from In-County, Still Residing | 15.5 | 18.7 | 0.83 | 19.5 | 0.79 | 22.3 | 0.69 | 21.5 | 0.72 |
| Admissions/Average Daily Census | 157.8 | 152.8 | 1.03 | 130.0 | 1.21 | 104.1 | 1.52 | 124.3 | 1.27 |
| Discharges/Average Daily Census | 146.7 | 154.5 | 0.95 | 129.6 | 1.13 | 105.4 | 1.39 | 126.1 | 1.16 |
| Discharges To Private Residence/Average Daily Census | 35.6 | 59.1 | 0.60 | 47.7 | 0.75 | 37.2 | 0.96 | 49.9 | 0.71 |
| Residents Receiving Skilled Care | 88.1 | 90.6 | 0.97 | 89.9 | 0.98 | 87.6 | 1.01 | 83.3 | 1.06 |
| Residents Aged 65 and Older | 81.0 | 95.0 | 0.85 | 95.4 | 0.85 | 93.4 | 0.87 | 87.7 | 0.92 |
| Title 19 (Medicaid) Funded Residents | 83.3 | 65.4 | 1.28 | 68.7 | 1.21 | 70.7 | 1.18 | 69.0 | 1.21 |
| Private Pay Funded Residents | 11.9 | 23.2 | 0.51 | 22.6 | 0.53 | 22.1 | 0.54 | 22.6 | 0.53 |
| Developmentally Disabled Residents | 2.4 | 0.8 | 3.04 | 0.7 | 3.33 | 0.7 | 3.34 | 7.6 | 0.31 |
| Mentally Ill Residents | 45.2 | 31.4 | 1.44 | 35.9 | 1.26 | 37.4 | 1.21 | 33.3 | 1.36 |
| General Medical Service Residents | 11.9 | 23.2 | 0.51 | 20.1 | 0.59 | 21.1 | 0.56 | 18.4 | 0.65 |
| Impaired ADL (Mean) | 36.7 | 48.9 | 0.75 | 47.7 | 0.77 | 47.0 | 0.78 | 49.4 | 0.74 |
| Psychological Problems | 57.1 | 44.1 | 1.30 | 49.3 | 1.16 | 49.6 | 1.15 | 50.1 | 1.14 |
| Nursing Care Required (Mean) | 6.5 | 6.5 | 1.00 | 6.6 | 1.00 | 7.0 | 0.93 | 7.2 | 0.92 |